609-734-6440

8/4/2008

Telephone

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						Complete if Known					
						Application Number		7731			
FEE TRANSMITTAL						Filing Date		/2004			
for FY 2007						First Named Inventor		ude Chapel e	et al.		
Applicant claims small entity status. See 37 CFR 1.27						Examiner Name Jeffrey M. Song					
TOTAL AMOUNT OF PAYMENT (\$) 930					Art Unit		2616				
TOTAL AMO	JNT OF PAY	MENI	(\$) 930		Attorne	y Docket No.	PF02	0064			
METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER 24498											
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :											
Deposit Account Deposit Account Number: 07-0832 Deposit Account Name: THOMSON LICENSING LLC											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments											
Under 37 CFR 1 16 and 1 17											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
	FILING FEES SE					EARCH FEES			ATION FEES Small Entity		
Amplicatio	n Tyno	Fee (\$	Small Entite Fee(\$)		ee(\$)	Small Entition Fee(\$)	<u>LY</u>	Fee(\$)	Fee(\$)	Fees Paid (\$)	
Application	ni iype	300	150		00	250		200	100		
Utility Design		200	100		00	50		130	65		
Plant		200	100	-	00	150		160	80		
Reissue		300	150	-	00	250		600	300		
Provisional		200	100		0	0		0	0		
2. EXCESS CLAIM FEES										Small Entity	
Fee Description Fee (\$)										Fee (\$)	
Each claim over 20 (including Reissues)									50	25	
Each independent claim over 3 (including Reissues)									200 360	100	
Multiple dependent claims						Eco Baid (\$)				180 e Dep <u>endent Claims</u>	
Total Claims Extra Claims Fee(\$)						Fee Paid (\$)				Fee (\$) Fee Paid (\$)	
20 or HP= X = HP = highest number of total claims paid for, if greater than 20.									1001	1001 4147	
				Fee(\$)	Foo	Paid (\$)					
Indep. Cla	<u>aims</u> -3 or HP=		X	<u>ι ee(φ)</u>	=	T did 147					
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
- 100 = / 50 = (round up to a whole number) x =											
4. OTHER FEE(S)										Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)											
			charge): RCE a							<u>\$930</u>	
<u></u>											
SUBMITTED BY											
	1				ı	Registration No.		40 077	l	COD 724 6440	

/Catherine A. Ferguson/

CATHERINE A. FERGUSON

Signature

Name (Print/Type)

40,877

(Attomey/Agent)